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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Muraber		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR		PROMBER FILED SELECT			۱۲	RATE	FEE		RATE	FEE
	CFEE CFR 1.16(a))						1	•	OR		8
TOTA	AL CLAMS CFR 1.18(C)		. minus 20 • •			Ι,	x 8		OR	X 5 *	
DIOE	EPENDENT CLASS CFR 1.19(b))	45	minus 3 s			l ⊩	× 8 *		OR	x3•	
<u> </u>	MATIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))						•		OR	+	
_											
	he difference in o	polumn 1 is less the	in som, enter	r V in column 2		TOTAL	L	OR	TOTAL	<del></del>	
CLAIMS AS AMENDED - PART II											
6	20/00	(Cotumn 1)		(Cotumn 2)	(Column 3)	_	SMALL E	YTITY	OR	OTHER SMALL	R THAN ENTITY
NTA	·	CLAIMS REMAINING AFTER -AMENDMENT	,	HIGHEST . NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
E E	Total CD CFR LNCS	. 4	Minus **	. 20.	- \	۱ţ,	x 8=		OR	·.Z.	
ENDMENT	independent CI CFR 1.1503	<del> - }</del>	Minus "	- 3	- 11		X 8		ok	**	
ş		THE RESIDENCE	= neperment		20 1 (2040)	Ιħ			OR	* 1	
۳	RISST PRESENTATION OF MULTIPLE DEPENDENT GLASM (37 CFR 1.19(4))						TOTAL		1	TOTAL	•
a lihl,						,	ADD'L FEE	لـــــــا	OR	ADDL FEE	
9	כחשיון	(Column 1)	<del></del>	(Column 2)	(Column 3)						
N F B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMENDMENT	Independent (37 GPR LISON)	• 7	Minus **	- 3	•	ĮΓ	× a = .		OR	X 5	
¥	RRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1.18(SI))						+4 =		OR	+1	
H.	•						TOTAL ADD'L FEE		OR.	TOTAL ADD'L FEE	
2-23-00 (Column 1) (Column 2) (Column 3)											
NT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
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AMENDMENT	Independent G7 GFR 1.1300	. /	Minus *	3	TXV	<b>[</b> ],	x se		OR .	x s=	
₹	FIRST PRESEN	TATION OF MULTIPL	E DEPENDEN	TCLAM GTC	TR 1.16000)		+: -		OR	+ : =	
						٠,٦	TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "O" in column 3.     If the "Fighest Number Previously Paid For" IN THES SPACE is less than 20, enter "20".											<del></del>
	" If the Trighest	Number Previous	Paid For In	N THIS SPACE	in less than 20,	. <b>0(1007</b> miller "1	"20". *				

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.18. The Information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. The will very depending upon the individual case. Any comments on the amount of time you require to complete its form another suggestions for medically this burden, should be sent to the Chief information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commerce for Patentia, P.O. Box 1450, Alexandria, VA 22313-1450.

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